LIST AVAILABLE CONT

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

PM 275438

	(CLAIMS AS	FILED - F Column Colu		(Column 2)			SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			16		Marketine of a continue of a sea in an arrange of a		ı	RATE	FEE		RATE	FEE
FOR		NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS		20 minus 20=		· Ø			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			# minus 3 =		* 1			X40=		OR	X80=	80.07
MULTIPLE DEPENDENT CLAIM P			RESENT		Ø			+135=		OR	+270=	270. S
* If the difference in column 1 is less than zero, enter "0" in column 2						ļ	TOTAL		OR		26 0.00	
CLAIMS AS AMENDED - PART II							SMALL ENTITY			OTHER THAN SMALL ENTITY		
		(Column 1) CLAIMS		(Colu	mn 2) IEST	(Column 3)		SMALL		OR !	SMALL	
AMENDMENT A	4811	REMAINING AFTER AMENDMENT		NUM PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 16	Minus	** /	20	=		X\$ 9=		OR	X\$18=	
	шаронаон	· 4	Minus	***	4	=		X40=		OR	X80=	
	FIRST PRESEN	NIATION OF M	OLTIPLE DEP	ENDEN	1 CLAIM		•	+135=		OR	+270=	
								TOTAL		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Coli	ımn 2)	(Column 3)		ADDIT. FEE		8	ADDIT: I EL	
		CLAIMS		HIG	HEST		1	f -	ADDI-	1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREV	MBER HOUSLY D FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***]=	4	X40=		OR	X80=	
L	FIRST PRESE	NTATION OF M	IULTIPLE DEF	ENDER	IT CLAIN		J	+135=		OR	+270=	
								TOTAL		OR	TOTAL	:
l		(Column 1)		(Calı	umn 2)	(Column 3	١	ADDIT. FEE			AUDII. FEC	
_	The same	(Column 1) CLAIMS		HIG	HEST	Coldifili	ጎ		ADDI-	1		ADDI-
AMENDMENT C		REMAINING AFTER AMENDMENT	30	PREV	MBER /IOUSLY D FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	į
	Independent	*	Minus	***		=	4	X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										4	TOTAL	
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											